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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		<b>Application Number</b> 09/683,988
		<b>Filing Date</b> March 8, 2002
		<b>First Named Inventor</b> Braga, et. al.
		<b>Group Art Unit</b> 1754
		<b>Examiner Name</b> Johnson, Edward M.
<b>Total Number of Pages in This Submission</b> <input type="text" value="9"/>		<b>Attorney Docket No.</b> 55295 (43640/55295)

### ENCLOSURES *(check all that apply)*

<input type="checkbox"/> Charge Deposit Account -20-0823 <input checked="" type="checkbox"/> Fee Attached \$110.00 <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> Affidavits/declarations(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 <input type="checkbox"/> Petition For Revival of an Application for Patent Abandoned Unintentionally Under 37 CFR 1.137(b))	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After-Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Request To Rescind Previous Nonpublication Request <input type="checkbox"/> Response to Notice of Allowability <input type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i>
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### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

<b>Firm or Individual Name</b>	Steven M. Ritchey, Reg. No. 46,321		
<b>Signature</b>			
<b>Date</b>	October 12, 2004		

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